

# RMD Bulletin

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## Telephone Services Now Directly Billable to Medi-Cal

Effective September 28, 2012, providers will be able to bill directly to Medi-Cal for services rendered over the telephone to clients who have both Medicare and Medi-Cal coverage. The Integrated System (IS) has been updated to add the SC modifier on claims to Medi-Cal when the telephone box is checked on the Add Outpatient Service Screen. This new functionality allows providers to submit claims that would

**Add Outpatient Service**

Options:  Return,  Check Eligibility,  Claim

RP: [Dropdown] Txnmy: [Dropdown]

Procedure Code: [Text Box]

Place Of Service: [Dropdown]

Face To Face Time: 0 Hrs [Text Box] Minutes [Text Box]

Other Time: 0 Hrs [Text Box] Minutes [Text Box]

Telephone  Tele-Psych  Patient Signature [Text Box] Provider Signature [Text Box]

Not Available  On File

Additional Participating Staff [Text Box]

Evid: 00-f, 01-f, 10-f, 11-f, 2A-f, 2B-f

otherwise be considered Medicare billable because of the procedure code, such as H0046, and the rendering provider, such as a Licensed Clinical Social Worker, directly to Medi-Cal *without* Medicare adjudication. EDI providers must make sure to add the SC modifier when submitting claims rendered by telephone.

Please note that the Telephone box has also been removed from the Add Day Treatment Service Screen. The Day Treatment procedure code, H2012, is already directly billable to Medi-Cal.

For further information on procedure codes that are not telephone allowable and will be denied, please see Quality Assurance (QA) Bulletin 12-04 available on the DMH website at [http://file.lacounty.gov/dmh/cms1\\_182642.pdf](http://file.lacounty.gov/dmh/cms1_182642.pdf).



We're here to help you...

If you have any questions or require further information, please contact RMD at (213) 480-3444 or [RevenueManagement@dmh.lacounty.gov](mailto:RevenueManagement@dmh.lacounty.gov).